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# TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission (Including this Transmittal Form)	-11-	Application Number <b>10/625,073-Conf. #9446</b>
Filing Date <b>July 22, 2003</b>	First Named Inventor <b>Mark I. Greene</b>	Art Unit <b>1617</b>
Examiner Name <b>L. M. Williams</b>	Attorney Docket Number <b>20273/100K201-US2</b>	

**ENCLOSURES (Check all that apply)**

<input type="checkbox"/> Fee Transmittal Form  <input type="checkbox"/> Fee Attached	<input type="checkbox"/> Drawing(s)  <input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> After Allowance Communication to TC
<input checked="" type="checkbox"/> Amendment/Reply (9 pages)  <input type="checkbox"/> After Final  <input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Petition  <input type="checkbox"/> Petition to Convert to a Provisional Application  <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences  <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> Extension of Time Request  <input type="checkbox"/> Express Abandonment Request  <input type="checkbox"/> Information Disclosure Statement  <input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> Terminal Disclaimer  <input type="checkbox"/> Request for Refund  <input type="checkbox"/> CD, Number of CD(s) _____  <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> Proprietary Information  <input type="checkbox"/> Status Letter  <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):
<input type="checkbox"/> Reply to Missing Parts/ Incomplete Application  <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	Remarks	

**SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT**

Firm Name	<b>DARBY &amp; DARBY P.C.</b>		
Signature	<b>/Samuel S. Woodley/</b>		
Printed name	<b>Samuel S. Woodley, Ph.D.</b>		
Date	<b>February 20, 2007</b>	Reg. No.	<b>43,287</b>

AMENDMENT TRANSMITTAL LETTER				Docket No. 20273/100K201-US2	
Application No. 10/625,073-Conf. #9446	Filing Date July 22, 2003	Examiner L. M. Williams	Art Unit 1617		
Applicant(s): Mark I. Greene et al.					
Invention: METHODS OF INHIBITING OSTEOCLAST ACTIVITY					
TO THE COMMISSIONER FOR PATENTS					
Transmitted herewith is an amendment in the above-identified application.					
The fee has been calculated and is transmitted as shown below.					
<b>CLAIMS AS AMENDED</b>					
Total Claims	<b>17 46</b>	- 20 =	0	x 25.00	0.00
Independent Claims	1	- 3 =	0	x 100.00	0.00
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					
Other fee (please specify):					
<b>TOTAL ADDITIONAL FEE FOR THIS AMENDMENT:</b>					0.00
<input type="checkbox"/> Large Entity			<input checked="" type="checkbox"/> Small Entity		
<input checked="" type="checkbox"/> No additional fee is required for this amendment.					
<input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of \$ _____. A duplicate copy of this sheet is enclosed.					
<input type="checkbox"/> A check in the amount of \$ _____ to cover the filing fee is enclosed.					
<input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.					
<input checked="" type="checkbox"/> The Director is hereby authorized to charge and credit Deposit Account No. <u>04-0100</u> as described below. A duplicate copy of this sheet is enclosed.					
<input checked="" type="checkbox"/> Credit any overpayment.					
<input checked="" type="checkbox"/> Charge any additional filing or application processing fees required under 37 CFR 1.16 and 1.17.					
<u>/Samuel S. Woodley/</u>			Dated: <u>February 20, 2007</u>		
Samuel S. Woodley, Ph.D. Attorney/Agent Reg. No.: 43,287					
DARBY & DARBY P.C. P.O. Box 5257 New York, New York 10150-5257 (212) 527-7610					